

Fill in this information to identify your case:			
Debtor 1	Maria First Name	Lucia Middle Name	Estrada Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS			
Case number (if known)	18-32930		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim	Priority amount	Nonpriority amount
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2.1	\$500.00	\$500.00	\$0.00
Internal Revenue Service Priority Creditor's Name P.O. Box 7317 Number Street	Last 4 digits of account number When was the debt incurred? 2016 and prior years		
As of the date you file, the claim is: Check all that apply.			
Philadelphia PA 19101 City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify		
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2016 and prior years			

Debtor 1 Maria Lucia EstradaCase number (if known) 18-32930**Part 1: Your PRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim	Priority amount	Nonpriority amount
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2.2		\$4,110.00	\$4,110.00	\$0.00
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Kritzer Law Firm

Priority Creditor's Name

12605 East Freeway, Suite 375

Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Houston	TX	77015
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City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- Domestic support obligations
- Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated
- Other. Specify

Is the claim subject to offset?

- No
- Yes

Debtor 1 Maria Lucia Estrada

Case number (if known) 18-32930

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim

4.1**\$600.00****Capital One**Nonpriority Creditor's Name
P.O. Box 85617

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce
 that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Credit Account

Richmond VA 23276-0001

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

4.2**\$0.00****Mac Auto Sales**Nonpriority Creditor's Name
1016 Spencer Hwy

Number Street

Last 4 digits of account number _____

When was the debt incurred? **5/2018**

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce
 that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Contract

South Houston TX 77587

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Deficiency, if any on 2007 GMC Acadia vehicle (mv \$5000) surrendered to creditor, contract balance (\$9000) prior to surrender.

Debtor 1 Maria Lucia Estrada Case number (if known) 18-32930**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3		\$600.00
Target National Bank		
Nonpriority Creditor's Name		
c/o Target Credit Services		
Number Street		
P.O. Box 1581		
Minneapolis	MN	55440-1581
City	State	ZIP Code
Who incurred the debt? Check one.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Account		

Debtor 1 Maria Lucia Estrada Case number (if known) 18-32930

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Mackie Wolf Zientz & Mann, PC	On which entry in Part 1 or Part 2 did you list the original creditor?
Name Attorneys at Law	Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims
Number Street 14160 Dallas Pkwy #900	<input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Dallas	Last 4 digits of account number _____
City	State ZIP Code TX 75254

Debtor 1 Maria Lucia EstradaCase number (if known) 18-32930**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	Total claim
Total claims from Part 1	6a. <u>\$0.00</u>
	6b. <u>\$4,610.00</u>
	6c. <u>\$0.00</u>
	6d. + <u>\$0.00</u>
6e. Total. Add lines 6a through 6d.	<u>\$4,610.00</u>

	Total claim
Total claims from Part 2	6f. <u>\$0.00</u>
	6g. <u>\$0.00</u>
	6h. <u>\$0.00</u>
	6i. + <u>\$1,200.00</u>
6j. Total. Add lines 6f through 6i.	<u>\$1,200.00</u>

Fill in this information to identify your case:

Debtor 1	Maria	Lucia	Estrada
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS			
Case number (if known)	18-32930		

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:
 MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Employment status	Debtor 1	Debtor 2 or non-filing spouse
		<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
	Occupation	Ophthalmologist Assistant	
	Employer's name	Coastal Eye Associates, PLLC	
	Employer's address	555 E Medical Center Blvd #101	
		Number Street	Number Street

Webster	TX	77598
City	State	Zip Code

City State Zip Code

How long employed there? **@2 mths**

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$2,467.83	
3. Estimate and list monthly overtime pay.	3. + \$0.00	
4. Calculate gross income. Add line 2 + line 3.	4. \$2,467.83	

Debtor 1	Maria Lucia Estrada	Case number (if known)	18-32930
		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	→ 4.	\$2,467.83	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$432.05	
5b. Mandatory contributions for retirement plans	5b.	\$0.00	
5c. Voluntary contributions for retirement plans	5c.	\$0.00	
5d. Required repayments of retirement fund loans	5d.	\$0.00	
5e. Insurance	5e.	\$0.00	
5f. Domestic support obligations	5f.	\$0.00	
5g. Union dues	5g.	\$0.00	
5h. Other deductions. Specify: _____	5h. +	\$0.00	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$432.05	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,035.78	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	
8b. Interest and dividends	8b.	\$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	
8d. Unemployment compensation	8d.	\$0.00	
8e. Social Security	8e.	\$0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00	
8g. Pension or retirement income	8g.	\$0.00	
8h. Other monthly income. Specify: <u>child support</u>	8h. +	\$381.33	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$381.33	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,417.11	+ _____ = \$2,417.11
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.			
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.			
Specify: _____	11. +	\$0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.	12.	\$2,417.11	
Combined monthly income			
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No. None.			
<input type="checkbox"/> Yes. Explain: _____			

Fill in this information to identify your case:

Debtor 1	Maria First Name	Lucia Middle Name	Estrada Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS			
Case number (if known)	18-32930		

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses _____

4. The rental or home ownership expenses for your residence.

Include first mortgage payments and any rent for the ground or lot.

4. _____

If not included in line 4:

- 4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues

4a. _____
 4b. \$100.00
 4c. \$30.00
 4d. _____

Debtor 1	<u>Maria Lucia Estrada</u>	Case number (if known)	<u>18-32930</u>
Your expenses			
5.	Additional mortgage payments for your residence, such as home equity loans		
6.	Utilities:		
6a.	Electricity, heat, natural gas	6a.	<u>\$135.00</u>
6b.	Water, sewer, garbage collection	6b.	<u>\$50.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$63.00</u>
6d.	Other. Specify: _____	6d.	_____
7.	Food and housekeeping supplies		
8.	Childcare and children's education costs		
9.	Clothing, laundry, and dry cleaning		
10.	Personal care products and services		
11.	Medical and dental expenses		
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.		
13.	Entertainment, clubs, recreation, newspapers, magazines, and books		
14.	Charitable contributions and religious donations		
15.	Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.	_____
15b.	Health insurance	15b.	_____
15c.	Vehicle insurance	15c.	<u>\$117.00</u>
15d.	Other insurance. Specify: _____	15d.	_____
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify: _____			
16.	16.	16.	16.
17.	Installment or lease payments:		
17a.	Car payments for Vehicle 1	17a.	_____
17b.	Car payments for Vehicle 2	17b.	_____
17c.	Other. Specify: _____	17c.	_____
17d.	Other. Specify: _____	17d.	_____
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		
18.	18.	18.	18.
19.	Other payments you make to support others who do not live with you.		
19.	19.	19.	19.

Debtor 1 Maria Lucia EstradaCase number (if known) 18-32930**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

- | | |
|---|------------|
| 20a. Mortgages on other property | 20a. _____ |
| 20b. Real estate taxes | 20b. _____ |
| 20c. Property, homeowner's, or renter's insurance | 20c. _____ |
| 20d. Maintenance, repair, and upkeep expenses | 20d. _____ |
| 20e. Homeowner's association or condominium dues | 20e. _____ |

21. Other. Specify: _____

21. + _____

22. Calculate your monthly expenses.

- 22a. Add lines 4 through 21.
 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.
 22c. Add line 22a and 22b. The result is your monthly expenses.

22a. _____	\$1,315.00
22b. _____	
22c. _____	\$1,315.00

23. Calculate your monthly net income.

- 23a. Copy line 12 (your combined monthly income) from Schedule I.
 23b. Copy your monthly expenses from line 22c above.
 23c. Subtract your monthly expenses from your monthly income.
 The result is your monthly net income.

23a. _____	\$2,417.11
23b. - _____	\$1,315.00
23c. _____	\$1,102.11

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

 No. Yes.

Explain here:

None.

Fill in this information to identify your case:

Debtor 1	Maria First Name	Lucia Middle Name	Estrada Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS			
Case number (if known)	18-32930		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

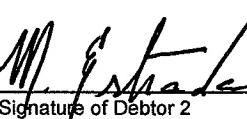
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ **Maria Lucia Estrada**

Maria Lucia Estrada, Debtor 1

Date **10/12/2018**

MM / DD / YYYY

X 
Signature of Debtor 2

Date

10/12/18

MM / DD / YYYY